

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Peiser For Congress

ADDRESS (number and street)

P O Box 230927

Check if different  
than previously  
reported. (ACC)

Encinitas

CA

92023

2. FEC IDENTIFICATION NUMBER ▼

C

C00549212

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

49

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
11 / 04 / 2014in the  
State of

CA

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2014

through

M M / D D / Y Y Y Y  
10 / 15 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Patricia Cratty

Signature of Treasurer

Patricia Cratty

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 20 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 21

Write or Type Committee Name

Peiser For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5820.00	71435.32
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	5820.00	71435.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	4701.54	75489.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	574.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	4701.54	74915.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	13844.38	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	13000.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 21

Write or Type Committee Name

Peiser For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

## (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

1500.00

30793.00

(ii) Unitemized.....

3320.00

38022.32

(iii) TOTAL of contributions from individuals ▶

4820.00

68815.32

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1000.00

2600.00

(d) The Candidate.....

0.00

20.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

5820.00

71435.32

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

13000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

13000.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

0.00

574.01

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

0.00

0.00

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

5820.00

85009.33

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 21

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4701.54	75489.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	4701.54	75489.88

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12725.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5820.00
25. SUBTOTAL (add Line 23 and Line 24).....	18545.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4701.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13844.38

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 21

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**Susan Cadman**

Mailing Address 1206 Barbara Dr

City

Vista

State

CA

Zip Code

92084-7226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAICOccupation  
software analyst

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : VNVP2D56VX8

Amount of Each Receipt this Period

25.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

**ActBlue**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

770.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2014

Transaction ID : VNVP2D56VX8E

Amount of Each Receipt this Period

25.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

**Diane Calkins**

Mailing Address 1440 Paseo De Las Flores

City

Encinitas

State

CA

Zip Code

92024-2363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
writer/photographer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		02		2014

Transaction ID : VNVP2D48YH2

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

275.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**ActBlue**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

770.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2014

Transaction ID : VNVP2D48YH2E

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

**Dwain Deets**

Mailing Address 1770 Whitehall Rd

City

State

Zip Code

Encinitas

CA

92024-1036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

N/A

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

950.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		02		2014

Transaction ID : VNVP2D48Z76

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

**Democracy Engine**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

670.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2014

Transaction ID : VNVP2D48Z76E

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Peiser For Congress**

Full Name (Last, First, Middle Initial) <b>Peter Dias</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 3956 Linmar Ln		Transaction ID : VNVP2D48YJ0
City Carlsbad	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer none	Occupation Research Scientist	* Earmarked Contribution: See Below
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 260.00	

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address		Transaction ID : VNVP2D48YJ0E
City	State	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation Conduit total listed in Agg. field	[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 770.00	

Full Name (Last, First, Middle Initial) <b>Mark Fleischner</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 3050 Fairfield Ave Apt 4H		Transaction ID : VNVP2D46X28
City Bronx	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	125.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Peiser For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sharlene Hamilton**

Mailing Address 502 Portico Dr

City State Zip Code  
Oceanside CA 92058-7979

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : VNVP2D4PCP7

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
**Terry Paule**

Mailing Address 24086 Gourami Bay

City State Zip Code  
Dana Point CA 92629-4504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : VNVP2D3M6W2

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
**Cecile S Richards**

Mailing Address 1206 Barbara Dr

City State Zip Code  
Vista CA 92084-7226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : VNVP2D510S1

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

500.00
--------



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Peiser For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Audrey Anne Terras**

Mailing Address 361 Ocean View Ave

City State Zip Code  
Encinitas CA 92024-2625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
U.C.S.D. Retired Math Professor

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
10 06 2014

Transaction ID : VNVP2D46NZ9

Amount of Each Receipt this Period

200.00

**B.** Full Name (Last, First, Middle Initial)  
**Dolores A Welty**

Mailing Address 2076 Sheridan Rd

City State Zip Code  
Encinitas CA 92024-1144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
10 13 2014

Transaction ID : VNVP2D4PBB7

Amount of Each Receipt this Period

150.00

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

350.00

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**COMMITTEE TO RE-ELECT LORETTA SANCHEZ**

**A.**

Mailing Address PO Box 6037

City

Santa Ana

State

CA

Zip Code

92706-0037

FEC ID number of contributing  
federal political committee.

**C** C00326264

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 01 2014

**Transaction ID : VNVP2D2XR42**

Amount of Each Receipt this Period

1000.00

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

1000.00

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 21

☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

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NAME OF COMMITTEE (In Full)

**Peiser For Congress**

Full Name (Last, First, Middle Initial)

## **A. Act Blue**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Charges for collection of donations

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 05 / 2014

Amount of Each Disbursement this Period

27.51

Transaction ID : VNTPT9Q2RP1

## **B. Act Blue**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  
Charges for collection of donations

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 12 / 2014

Amount of Each Disbursement this Period

20.56

Transaction ID : VNTPT9Q2RM6

## **c. Act Blue**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  
Charges for collection of donations

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 15 / 2014

Amount of Each Disbursement this Period

2.97

Transaction ID : VNTPT9Q2RK8

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

51.04

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**A. COX**

Mailing Address 5159 Federal Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

City	State	Zip Code
San Diego	CA	92105-5428

Purpose of Disbursement  
Internet

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

25.00
-------

Transaction ID : VNTPT9Q2RC2

**B. Susan Cratty**

Mailing Address 917 Rosemary Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Carlsbad	CA	92011-3941

Purpose of Disbursement  
Salary

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : VNTPT9Q2NG8

**c. Cricket Wireless**Mailing Address 12735 Morris Road Ext  
Ste 3000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2014

City	State	Zip Code
Alpharetta	GA	30004-8903

Purpose of Disbursement  
Cell phones for phone banking

006

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

42.00
-------

Transaction ID : VNTPT9Q2R81

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1067.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**A. Cricket Wireless**Mailing Address 12735 Morris Road Ext  
Ste 3000

City Alpharetta State GA Zip Code 30004-8903

Purpose of Disbursement  
Cell phones for phone banking

006

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

42.00
-------

Transaction ID : VNTPT9Q2R73

**B. Crotty Consulting**

Mailing Address 35601 1st Avenue

City San Diego State CA Zip Code 92103

Purpose of Disbursement  
Consultant fees

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : VNTPT9Q2P69

**c. Democracy Engine**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Charges for collection of donations

001

Category/  
Type

Candidate Name

**Democracy Engine**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

47.96
-------

Transaction ID : VNTPT9Q2RJ0

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1589.96



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

City	State	Zip Code
Mountain View	CA	94043-1351

Amount of Each Disbursement this Period

45.00
-------

Purpose of Disbursement  
Data Base

001

Transaction ID : VNTPT9Q2RB4

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Ethan Johnson Moore**

Mailing Address 2962 Brandon Cir

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Carlsbad	CA	92010-6546

Amount of Each Disbursement this Period

350.00
--------

Purpose of Disbursement  
Salary

001

Transaction ID : VNTPT9Q2NF0

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. NGP**Mailing Address 1101 15th St NW  
Ste 500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Washington	DC	20005-5006

Amount of Each Disbursement this Period

550.00
--------

Purpose of Disbursement  
Data Base

001

Transaction ID : VNTPT9Q2RD0

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

945.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**A. NGP**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Overage billing for emails

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : VNTPT9Q2R49

**B. San Diego Gas & Electric**

Mailing Address PO Box 25111

City Santa Ana State CA Zip Code 92799-5111

Purpose of Disbursement  
Office Electric

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

156.82
--------

Transaction ID : VNTPT9Q2RE8

**c. Staples**

Mailing Address 2712 Loker Ave W

City Carlsbad State CA Zip Code 92010-6603

Purpose of Disbursement  
pens, labels for yard signs

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

57.47
-------

Transaction ID : VNTPT9Q2ND4

pens,labels for yard signs

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

289.29
--------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Peiser For Congress**

Full Name (Last, First, Middle Initial)

**A. State Farm Insurance**

Mailing Address 2808 Roosevelt St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
Carlsbad	CA	92008-1688

Amount of Each Disbursement this Period

44.58
-------

Purpose of Disbursement  
Insurance

001

Transaction ID : VNTPT9Q2R57

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 1150 Garden View Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2014

City	State	Zip Code
Encinitas	CA	92024-2468

Amount of Each Disbursement this Period

11.40
-------

Purpose of Disbursement  
Postage

001

Transaction ID : VNTPT9Q2R99

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

55.98

4576.53

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 18 OF 21

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNVP2A38SD5L

Peiser For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Dave Peiser

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1106 2nd St  
PMB 127

City

State

ZIP Code

Encinitas

CA

92024-5008

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 05 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 19 OF 21

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNVP2A38SG9L

Peiser For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Dave Peiser

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1106 2nd St  
PMB 127

City

State

ZIP Code

Encinitas

CA

92024-5008

Original Amount of Loan

7500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
12 / 22 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7500.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 20 OF 21

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNVP2A381H4L

Peiser For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Dave Peiser

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1106 2nd St  
PMB 127

City

State

ZIP Code

Encinitas

CA

92024-5008

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 05 / 2014

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

**TOTALS** This Period (last page in this line only)..... ►

13000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SC/10

Transaction ID : VNVP2A381H4L

Loan from candidate

Form/Schedule:

Transaction ID: